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PATENT ATTORNEY DOCKET NO. 03848-00029

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)			
Yanxiang Cao et al.) Examiner: Jeffrey Siew			
Serial No.: 09/634,352) Art Unit: 1656			
Filed: August 9, 2000))			
Title: METHODS OF GENI MONITORING	EEXPRESSION	RECEIVED			
Assistant Commissioner for Pa Washington D.C. 20231	tents	TECH CENTER 1600/2900			
	TRANSMITTAL LE	ETTER			
Sir:					
In regard to the above i	dentified application, we	are transmitting herewith the attached:			
1. Amendment and	Amendment and Response to Office Action,				
2. Version of Ame	Version of Amendments with Markings to Show Changes Made,				
3. Petition for Three	Petition for Three-Month Extension of Time, and				
4. Return postcard	4. Return postcard.				
With respect to addition	al fees:				
A. No addit	ional fee is required.				
B. An addit	ional fee is required and	has been calculated as shown below:			

USSN 09/634,352 Express Mail receipt no. EL 767679725 US 1,

EL767679725US)

CLAIMS AS AMENDED								
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate		(7) Additional Fee	
Total Claims	46	Minus	46	0	X \$18	=	\$0.00	
Indep. Claims	6	Minus	6	0	X \$84	=	\$0.00	
			Total Additional Claims Fees		\$0.00			
Petition/Request for Extension of Time		_3_ months		\$920.00				
			Total Additional	al Fees for this	\$920.0		\$920.00	

^{*} If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

	C.	Attached is a check in the amount of \$
	D.	The Commissioner is hereby authorized to charge the total additional fee to our Deposit Account No. 19-0733. A duplicate copy of this sheet is enclosed.
<u>X</u>	E.	The Commissioner is hereby authorized to charge the Petition fee of \$920.00 to Deposit Account No. 19-0733.

The Commissioner is hereby authorized to charge any additional fees or credit overpayment to Deposit Account No. 19-0733.

Respectfully submitted,

Dated: January 10, 2001

John R. Iwanicki, Reg. No. 34,628

RANNER & WITCOFF, LTD. 28 State Street, 28th Floor

Boston, MA 02109 (617) 227-7111

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

^{***} Each multiple dependent claim should be counted as the number of claims from which it depends.